This portion MUST be returned with your payment to ensure proper credit. THANK YOU

| CCOUNT BILLED PROJECT NAME | | PROJECT ID | |
|--|--|-------------------|-----------------------------|
| GEMSTONE MINING INC | BERYL 1 | | S230018 |
| DUE DATE ANNUAL FEE AMOUNT DUE | FEE NOT ENCLOSED | Change of Address | |
| 7/28/2000 \$ 100 \$ 100 TAX ID OR SOCIAL SECURITY # | Permittee requests an inspection to close out this permit. | Contact | CEIVED |
| | | Address | JL 17 2000 |
| DIVISION OF OIL GAS AND MINING 1594 WEST NORTH TEMPLE SUITE 1210 PO BOX 145801 SALT LAKE CITY UT 84114-5801 | | | IVISION OF AS AND MINING |
| | | Phone | 0001 |

Please make check payable to:
Division of Oil, Gas and Mining